

**Procedures and Criteria for Ongoing Eligibility**  
**Massachusetts Early Intervention System**  
**Frequently Asked Questions**  
**December 2008**

- 1. If Annual IFSPs no longer need to be entered into the EIIS system for children eligible with a non-asterisked diagnosis as noted on the *Massachusetts Early Intervention Diagnosed Conditions List (January 2009)*, will programs receive an Error Report?**

*The DPH is aware of the impact on the EIIS based on the implementation of the Massachusetts Diagnosed Conditions List and procedures for determining ongoing eligibility. Accordingly providers will not receive an "Error Report" based on the programmatic changes.*

- 2. Why is the DPH now requesting that programs not input information into the EIIS when the child has a diagnosis?**

*The current EIIS is designed to follow the flow of clinical practice related to eligibility evaluation/assessment, IFSP development and discharge/transition from EI. The current EIIS only allows for IFSP data to be entered into EIIS when tied to an Eligibility Evaluation. Since providers will no longer be entering Annual Eligibility Evaluation data on most children eligible based on an established condition, the system will not need IFSP data to be entered on an annual basis.*

- 3. Why were the following conditions removed from the Established Conditions List: hydrocephaly; hypotonia/hypertonia; respiratory issues/pulmonary concerns/apnea; VATER syndrome; congenital anomalies; musculoskeletal abnormality/deformity; and anoxia?**

*The DPH workgroup discussed the above noted conditions and determined that if any of these conditions were impacting the child's development, the child would be eligible for EI based on delay. In addition, some of these conditions are not specific diagnoses: e.g., respiratory issues or pulmonary concerns may be related to a more specific diagnosis. The Massachusetts Diagnosed Conditions List is designed to define those children eligible for Early Intervention based on an Established Condition which is only one category of our current eligibility criteria. Children will continue to be eligible for EI based on Developmental Delay, At Risk, and Clinical Judgment. The list is not meant to exclude potentially eligible children for EI, but to provide some clarity and consistency for those children eligible based *solely* on an Established Condition.*

**4. What is the timeline for implementation of the Massachusetts Diagnosed Conditions List?**

*In response to the Massachusetts Early Intervention Consortium concerns raised regarding the revised Massachusetts Early Intervention Diagnosed Conditions List, the Department of Public Health has delayed implementation until **January 1, 2009** in order for internal program tracking systems to be developed.*

**5. If a child has a diagnosis that is asterisked after 1/1/09, and they were originally determined eligible for EI based on the asterisked condition, are programs able, with medical documentation, to determine eligibility for that condition or do they need to have a developmental delay?**

*Eligibility should be re-determined for all children based on the Massachusetts EI Diagnosed Conditions List and the Procedures for Determining Ongoing Eligibility guidance document. In determining eligibility effective January 1, 2009, any diagnosis denoted with an asterisk on the new list would be considered the initial eligibility determination. Program should then re-determine eligibility in one year; and continued eligibility at that time would then be based on delay.*

**6. How should EIPs re-determine eligibility for children currently enrolled in EI based on an Established Condition that has been removed from the new list?**

*Programs should re-establish eligibility by administering a DPH approved Eligibility tool, or providing medical documentation of an approved diagnosis, then determine the timeframe for eligibility re-determination based on the category of eligibility.*

*For example, a program has two options at the time of the eligibility re-determination for a child currently eligible for EI with a diagnosis of “ataxia”. The program would need to re-establish ongoing eligibility by either providing medical documentation in the child’s record that the child has a diagnosis that meets the criteria of Ataxia-Telangiectasia on the new list. The second option is to perform an eligibility evaluation to determine if the child is eligible based on delay.*

*Programs should create a new evaluation in the EIIS on an Eligibility/Evaluation Form to include the diagnosis and the date of the evaluation or date of confirmation of the diagnosis. Written documentation of the diagnosis by an appropriately qualified medical/clinical professional must be present in the child’s record.*

- 7. If no eligibility evaluation is completed at the annual IFSP, what information should be included in the child's developmental profile?**

*If an evaluation/assessment tool is completed at the time of the annual IFSP, that information may be documented in the developmental profile. If an evaluation/assessment tool was not completed, clinical observation and/or parent input may be documented in the Developmental Profile.*

- 8. If a child completes their eligibility year with a diagnosis of torticollis and then is discharged and later referred again for current torticollis (it can resurface), would the child be eligible for one year or six months?**

*The child would be eligible for one year based on the current diagnosis of torticollis. The program would need to provide written documentation of the current diagnosis by a physician in the child's record.*

- 9. What happens if a child is referred with a hearing loss, but it is unknown whether or not it is permanent?**

*Children with a hearing loss that is not permanent or with an undetermined level of hearing loss, may be eligible for EI based on developmental delay or clinical judgment in which case ongoing eligibility would be re-determined in six months.*